



CHAD

— Serving Humanity in Love —

CENTRE FOR COMMUNITY HEALTH & DEVELOPMENT (CHAD)

CHILD SAFEGUARDING POLICY

JUNE 2013

BACKGROUND

Centre for Community Health and Development International (CHAD) int'l is a non-discriminatory, non-governmental organization with mandate to improve on the health and quality of life of Nigeria's rural children and women. It was established in 2002 by a group of women from different

religious and ethnic background in Nigeria. CHAD International envisions an educationally and politically sustained society where young people and women will exercise their health (sexual reproductive) and political rights. The mission is to create an enabling environment that will enhance their development. The main objective of the organization are to;

- a. Advocate for youth and women's political and sexual Reproductive rights.
- b. Collaborate with other NGO's and government in the advancement of peace and good governance
- c. Provide quality and up to date information and services on sexual reproductive health / HIV/AIDS/family planning for improved quality of life.

CHAD International has 6 main operating units – Governance/ Human Rights, Health, Finance and procurement, Monitoring and Evaluation, Environmental and Resource Mobilization Unit. Each of the unit is headed by an officer. CHAD has over 11 staff and 30 community support staff all on basic allowances.

POLICY STATEMENT

Centre for Community Health and Development International a non-governmental, religious and political organization committed to working to prevent any form of abuse by implementing policies, procedures and plans to keep children safe across all the programs, administration and entire organization. We align our belief with basic child rights provisions as set out in the UN Convention on the Rights of the Child 1989 that all children regardless of their status of health.

Parenthood, disability, ethnicity, religious/cultural background or gender should be protected from all forms of abuse and neglect. CHAD sees out to ensure that all staff, volunteers, consultants or partners, schools, vocational training centres, health facilities, do not engage in any behavior, relationship and action that would be misinterpreted by children, their families, and care givers. We firmly agree that all our partners have fundamental duty to keep children safe from abuse.

Behavior Protocols

The organization is committed towards protecting children. The organization aligns with UN convention of the rights of child and all staff should read it.

The organization ensures that all children are listened to and are involved in decision making. The organization recognizes that all children have equal rights to protection.

No staff, volunteers or any other personnel of the organization be allowed to stay overnight with one or more children whether in child accommodation, project promises or elsewhere.

No organizational personnel should fondle, hug, kiss or touch minor in an inappropriate or culturally insensitive way.

In dealing or supervising minors' activities, the two adult principles should be followed to avoid unnecessary and suspicious allegation and actions.

Staff and other personnel staff should still be held responsible for even if a child behaves in a seductive manner.

Adult should avoid being placed in uncompromising or vulnerable position.

Inappropriate behavior or action toward children provides a ground for discipline.

All personnel must be concerned about perception and appearance in their language, actions and relationship with children.

Staff with proven record of unacceptable behavior will be given a written code to internalize to afford inappropriate behavior with children.

CHAD International does not operate a residential home for children but if in the future the organization must do so, then children will be adequately supervised and protected all times.

Use of visual images on children.

Any staff, volunteer and partner of CHAD seek the consent of children before taking and using their images.

Children between the age of 16-17 should be able to give consent on the use of their images.

For Children below the ages of 16-year-old they're the consent of their caregivers/parent children should be sought.

All CHAD International personnel should explain the children and caregivers reason taking and using images.

Policies and procedures children

The organization shall developed review CP policy every 3 years. This must be endorsed the senior management board or committee of CHAD. All staff must follow the policy step by step. There following step should be taken to address concern about a child safety or welfare.

Remove the child from the scene of risk, report to nearest police station, ensure that the immediate need of the child is met and make referral.

There should be a staff designated for child protection with clear cut roles defined.

CHAD CP policies, program and project take recognizes of the local circumstances and culture.

Recruitment and training

All prospective employees, volunteers and board members will be the agency's child

All applicants will be provided with police checks.

The organization will require from all applicants reliable character with particular reference to child protection, therefore during interview questions asked will include previous work done on child protection by the applicants

All staff, and volunteers should be provided with equal opportunity to attend trainings on child protection to learn how to recognize and respond to concerns about child abuse.

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All staff, volunteers and boards members, independent contractors, volunteers will be given a copy of the policy and be required to sign a declaration they have received and received and clearly understood the content.

Staff, volunteers, independent contractors will be monitored by term leaders to whom they are assigned to ensure strict compliance to the provisions in the policy

Any visiting staff to the field will be interviewed by CP officer.

All staff should adhere to recommended steps as highlighted in the CP officer.

All staff should adhere to the organization guideline of keeping children safe,

All staff adhere to recommended steps as highlighted in the cp in keeping children safe

CHAD will work and agree with partners on good practices and standards in dealing in preventing and responding to all form child abuse children.

Procedures for reporting suspected issues or Actual abuse of children

Where there is a proven cases of inappropriate behavior with children, the CP officer should be notified confidentially. This should be reported not later 24 hour to the child protection officer and recorded in appropriate template.

Perpetrator will be removed from the camp

The CP officer will then notify the management staff.

A disciplinary committee will be set up to investigate based on term of reference given to them.

The management staff will then implement recommended action.

Surveillance should be mounted to verify and confirm this further abuse.

Information and communications

CHAD will work with children to ensure that they are made aware of their rights to be safe from abuse.

Everyone in CHAD should know which officer is responsible for keeping children safe.

CHAD shall keep contact details of CP resources, safe places, local, state and national authorities and emergency medical help.

CHAD shall provide children they work with information on where to go for help and advice in relation to abuse, harassment and bullying.

Appendix 1

The roles of Designated child safeguarding focal point.

He or she should receive information

Make a prompt response.

Consult with local agencies.

Make a formal referral if appropriate

Assess risk

Ensure that all information is recorded

Appendix 2s

Practice principle

All action taken while protecting and responding to victims of abuse, exploitation, violence etc. must be in the best interest of the child.

The consent of the child must be considered

Other include:

- Confidentially
- No stigmatization
- Reassuring the child of his or her safety
- Involvement of the child in decision making
- Early intervention
- Safety of the child
- Family focused
- Community involvement
- Evidence based intervention
- Practice principles
- Protection prevention
- Rescue
- Early warning, sensitization/enlightenment through media, through media, quiz competition on HR, musical road shows, essay writing, films, drama
- Interface and involvement of community/religious leaders
- Building the capacity of police, NYSC, CBOs, NGOs, religious and traditional rulers on CP.

Response

- Regular monitoring and follow up (detention centre, remand home, Hospitals for cases of abuse)
- Investigation through interview, information gathering
- meeting the immediate needs of the child
- Get the consent of the child and parents
- Assure the child of confidential
- Assure the child of safety
- Trace contract
- Unification
- Interview parent and guardians where identified
- Documentation - (Narrative report, data collection form, photograph filling and record keeping, video tool.
- Report

Referral

- Identify relevant functional services providers and develop service referral director
 - Use tools for referral
 - Follow and feed back
 - Document.
 - **Medication**
 - Setting up case management committee.
 - Assessment of the nature of the case, recommend for medication by appropriate authority.
 - Link up with experts for case management and response.
 - Follow up and document

All CHAD staff should be aware of culturally sensitive practices like child marriage, female genital mutilation, traditional marks/tattoos, almajiri, labeling children as witches stigmatization and non-disclosure of rape to protect family names.

They should also know that these can be addressed through – advocacy, enlightened, dialogue, government intervention, interface approach, media (electronic and print), working with tradition media, town announcer, age grade leaders, community structure / community volunteer etc.

APPENDIX 1

CHILD PROTECTION REPORTING PROCEDURE FORM

CONFIDENTIAL

Case number

Child's name

Referral details

Time

Date

Place

Referrer's details;

Name:

Address:

Contact:

Occupation:

Relationship to child

Child's details:

Name:

Age: Date: Gender Ethnicity

Address:

Household structure:

Schools: class: Teacher:

Religion: Any disability:

Changes in child's behavior:
